

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	19	6/17/90
O.J.P.E. CLASSIFIER			6/18/90
FORMALITY REVIEW	SP	71698	6/18/90

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 - ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	1	1	12/6/90
2	2	2	12/6/90
3	3	3	12/6/90
4	4	4	12/6/90
5	5	5	12/6/90
6	6	6	12/6/90
7	7	7	12/6/90
8	8	8	12/6/90
9	9	9	12/6/90
10	10	10	12/6/90
11	11	11	12/6/90
12	12	12	12/6/90
13	13	13	12/6/90
14	14	14	12/6/90
15	15	15	12/6/90
16	16	16	12/6/90
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19	19	19	12/6/90
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25	25	25	12/6/90
26	26	26	12/6/90
27	27	N	12/6/90
28	28	N	12/6/90
29	29	N	12/6/90
30	30	N	12/6/90
31	31	N	12/6/90
32	32	N	12/6/90
33	33	N	12/6/90
34	34	N	12/6/90
35	35	N	12/6/90
36	36	N	12/6/90
37	37	N	12/6/90
38	38	N	12/6/90
39	39	N	12/6/90
40	40	N	12/6/90
41	41	N	12/6/90
42	42	N	12/6/90
43	43	N	12/6/90
44	44	N	12/6/90
45	45	N	12/6/90
46	46	N	12/6/90
47	47	V	12/6/90
48	48	N	12/6/90
49	49	N	12/6/90
50	50	V	12/6/90

Claim	Final	Original	Date
51	51	51	12/6/90
52	52	52	12/6/90
53	53	53	12/6/90
54	54	54	12/6/90
55	55	55	12/6/90
56	56	56	12/6/90
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96	96	96	12/6/90
97	97	97	12/6/90
98	98	98	12/6/90
99	99	99	12/6/90
100	100	100	12/6/90

Claim	Final	Original	Date
110	110	110	
112	112	112	
113	113	113	
114	114	114	
115	115	115	
116	116	116	
117	117	117	
118	118	118	
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136	136	136	
137	137	137	
138	138	138	
139	139	139	
140	140	140	
141	141	141	
142	142	142	
143	143	143	
144	144	144	
145	145	145	
146	146	146	
147	147	147	
148	148	148	
149	149	149	
150	150	150	

If more than 150 claims or 10 actions  
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Best Available Copy